

EMERGENCY EQUIPMENT RENTAL AGREEMENT

| 1. ORDERING OFFICE (name and address) Department of Natural Resources & Conservation Attn: Jeff Williams PO Box 201601 Helena MT 59620-1601 | | AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT | | | | |
|---|---|---|--------------------|-------------------|---------|---------------------------------|
| | | 2. AGREEMENT NUMBERS: DNRC: DNR-075360-32 FS: AG-0343-C-07-3057 BLM: ESE070631 | | | | |
| 4. CONTRACTOR a. name and address Ostberg Fire Services PO Box 9398 Missoula MT 59807 | | 3. EFFECTIVE DATES a. beginning 6/1/07 | | b. ending 5/31/08 | | |
| | | 5. POINT OF HIRE (location when hired) Location at time of hire. | | | | |
| Tax ID# 517600535 DUNS: 142975205 | | 6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY <u> X </u> CONTRACTOR <u> </u> GOVERNMENT | | | | |
| c. telephone number (day) 406-788-1300 or 406-788-1661 or 406-467-467-2817 | d. telephone number (night) 406-788-1300 or 406-788-1661 or 406-467-467-2817 | 7. OPERATOR FURNISHED BY <u> X </u> CONTRACTOR <u> </u> GOVERNMENT | | | | |
| 8. TYPE OF CONTRACTOR (X appropriate boxes) <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> LARGE BUSINESS <input type="checkbox"/> SMALL DISADVANTAGED OWNED <input type="checkbox"/> WOMEN OWNED <input type="checkbox"/> VETERAN/DISABLED VETERAN <input type="checkbox"/> HUB ZONE <input type="checkbox"/> LOCAL GOV'T?FED> EMPLOYEE | | | | | | |
| 9. ITEM DESCRIPTION | 10. NUMBER OF OPERATORS | 11. WORK OR DAILY | | 12. SPECIAL | | 13. GUARANTEE (8 or more hours) |
| | | a. rate | b. unit | a. rate | b. unit | |
| Portable Wash Station – 2 sinks | 1 | \$100.00 | Day (1 to 7 days) | N/A | N/A | N/A |
| | | \$100.00 | Day (8 to 30 days) | | | |
| | | \$100.00 | Day (31 + days) | | | |
| Custom Wash Station- 12 sink | 1 | \$1000.00 | Day (1 to 7 days) | N/A | N/A | N/A |
| | | \$1000.00 | Day (8 to 30 days) | | | |
| | | \$1000.00 | Day (31 + days) | | | |
| Custom Wash Station- 13 sink | 1 | \$1000.00 | Day (1 to 7 days) | N/A | N/A | N/A |
| | | \$1000.00 | Day (8 to 30 days) | | | |
| | | \$1000.00 | Day (31 + days) | | | |

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|--|--|-----------------------------------|--------------------|-----|--------------------|-----|
| Service calls/Delivery/Pickup: 5 units or less to a location. 2 sink units | | \$1.50 | mi. (See 14.d.) | N/A | N/A | N/A |
| Additional Service Calls (per unit, If ordered) | | N/A | Ea. | N/A | N/A | N/A |
| Remote Travel Hourly Rate-Primitive Roads – See Division A 2.2 of IFB 075360. | | N/A | Hr. | N/A | N/A | N/A |
| Mileage over 75 mile radius (75 miles one way or 150 miles round trip). If a vendor is claiming mileage over the 75 radius, the vendor must submit documentation from one of the online route/direction web sites. | | \$1.50 | Mi. | N/A | N/A | N/A |
| Reset Fee within camp area. | | \$25.00 2 sink \$100.00 others | Ea. | N/A | Mi. (See 14.e.) | N/A |

14. SPECIAL PROVISIONS

(a.) The Provisions of IFB 075360CSW and General Clauses along with replacement clauses are attached and incorporated herein. See attached DNRC General Provisions, Federal Acquisition Regulations (FAR) clauses, NRCG Supplemental Terms and Conditions to the General Clauses of the EERA, OF-294, and the Register of Wage Determination Under the Service Contract Act.

b. For service calls, mileage shall be calculated from the vendor's base or lodging point to the sink unit location and return to one of the above. Service includes cleaning, sanitizing and refilling of supplies.

c. On day of delivery a service charge will be made only if another service call plus mileage to the site is required that same day. There will be no pickup charge except for service and mileage the last day.

d. Reset fee: No mileage paid within the camp area. Mileage only will be charged for each trailer load if units are to be moved outside of the camp location. One day notification is required so contractor can bring required trailer for moving units.

e. Equipment furnished under the agreement is not subject to pro-rating on the 1st or last day.

f. This EERA is void if not presented with a valid Incident Specific Resource Order or Number.

g. **BILLING** – Each Host Agency is responsible for their incident payments.

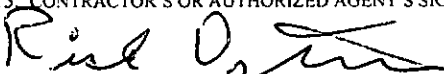
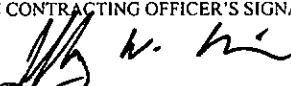

Payment office will be designated in Block 9 on the Emergency Equipment - Use Invoice, Form OF-286.

Federal agency fire payments will be processed and paid by one of the national fire payment centers.

The States of Montana, North Dakota, and Idaho will process payments for their fires.

**** For the purpose of this ERA, an operational period is 24 hours. (0001-2400)**

Due to the immediate needs dictated by wildland fire fighting activities, the normal procedures to document contractor deviations cannot be followed. If the contractor services/equipment fails to meet or exceed requirements, the contracting agency may take whatever steps are necessary to obtain services/equipment which meets their needs

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| 15. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE  | 15. a. PRINT NAME AND TITLE Rick Ostberg | 15. b. DATE 5-4-07 |
| 16. DNRC CONTRACTING OFFICER'S SIGNATURE  | 16. a. PRINT NAME AND TITLE JERRY W. Williams Ranch Agt | 16. b. DATE 5/10/07 |
| 17. FEDERAL CONTRACTING OFFICER'S SIGNATURE  | 17. a. PRINT NAME AND TITLE Deborah Wessels CO | 17. b. DATE 5/31/07 |